

02-12-01

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PTO/SB/05 (11-00)

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Please type a plus sign (+) inside this box → ☒UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.

506812000120

First Inventor

John V. TYRRELL, Patricia R. BERGQUIST, Peter L.
BERGQUIST, Christopher A. SCHOLIN

Title

COMPOSITIONS AND METHODS FOR DETECTING RAPHDOPHYTES

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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EL209765284US

CHASE J. TROMBELLA

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27
3. ☒ Specification [Total Pages **49**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 USC 113) [Total Sheets **-0-**]
5. ☐ Oath or Declaration [Total Pages **2**]
 - a. ☒ Newly executed (original or copy) COPY
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☒ Application Data Sheet. See 37 CFR 1.76 -2 pgs

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☒ Computer Readable Form (CRF)
 - b. ☐ Specification Sequence Listing on
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☒ paper - 9 pgs
 - c. ☒ Statements verifying identity of above copies - 1 pg

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☒ 37 CFR 3.73(b) Statement [Total Pages **3**]
(where there is an assignee) ☒ Power of Attorney - 3 pgs
11. ☐ English Translation document (if applicable)
12. ☒ Information Disclosure Statement (IDS) - 3 pgs / PTO-1449-2 pgs ☒ 27 CITED only - no copies of citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.
 1. Copy of Petition for Extension of Time from parent application Serial No. 09/596,136 - 2 pgs
 2. Fee Transmittal for 2001 - 1 pg
 3. Appln Fee Determination Record - 1 pg
 4. Check in the amount of \$615.00 filing fee
17. ☒ Other

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

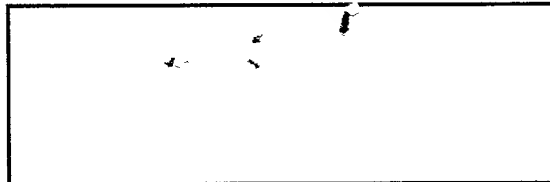
☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No: 09/596,136 filed June 16, 2000 which was a non-provisional of Provisional Appln. No. 60/141,362 filed June 28, 1999

Prior application information:

Examiner C. MYERS Group / Art Unit: 1655

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Labelor ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

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Signature	Michael R. Ward			Date February 9, 2001	

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

506812000120

CLAIMS AS FILED - PART I
CIP OF 09/596,136 FILED 6/16/2000
(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$355.00	OR		\$710.00
TOTAL CLAIMS (37 CFR 1.16(c))	40 minus 20 =	20	x\$9.00	\$180.00	OR	\$18.00	\$*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5 minus 3 =	2	x\$40.00	\$ 80.00	OR	\$80.00	\$*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+\$135.00	\$ -0-	OR	\$270.00	\$*
				TOTAL		TOTAL	\$*
							\$615.00

*If the different in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

Burden Hours Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231